

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 091830939 FILING DATE

APPLICANT(S)

CLAIMS

1.	AS FILED		AFTER AMENDMENT		AFTER 2nd AMENDMENT		1.	IND.		DEP.		IND.		DEP.		1.	IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
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50.																	99			
TOTAL IND.																	100			
TOTAL DEP.																				
TOTAL CLAIMS																				